IN THE UNITED STATES DISTRICT COURT FOR THE WESTERN DISTRICT OF WISCONSIN

LYDELL WASHINGTON,

Plaintiff,

ORDER

v.

Case No. 21-cv-37-wmc

JAY VAN LANEN, et al

Defendants.

Plaintiff Lydell Washington has filed a proposed civil complaint, but has neither paid the filing fee nor requested leave to proceed without prepayment. For this case to proceed, plaintiff must pay the \$402 filing fee<sup>1</sup> or submit a properly supported motion for leave to proceed without prepayment of the filing fee no later than February 9, 2021.

A motion for leave to proceed without prepayment of the filing fee must be accompanied by a certified copy of plaintiff's inmate trust fund account statement (or institutional equivalent) for the six-month period immediately preceding the date of the complaint. 28 U.S.C. § 1915(a)(2). If I find that plaintiff is indigent, I will calculate an initial partial payment amount that must be paid before the court can screen the merits of the complaint under 28 U.S.C. § 1915(e)(2). Thereafter, plaintiff will be required to pay the balance of the filing fee in installments.

## ORDER

IT IS ORDERED that plaintiff Lydell Washington may have until February 9, 2021 to submit the \$402 filing fee or a motion for leave to proceed without prepayment and a trust

<sup>&</sup>lt;sup>1</sup> Effective December 1, 2020, the total fee for filing a civil action is \$402 (the \$350 statutory fee plus the \$52 miscellaneous administrative fee).

fund account statement for the period beginning approximately July 19, 2020 and ending approximately January 19, 2021. If, by February 9, 2021, plaintiff fails to respond to this order, I will assume that plaintiff wishes to withdraw this action voluntarily. In that event, the case will be closed without prejudice to plaintiff filing the case at a later date.

Entered this 19th day of January, 2021.

BY THE COURT:

/s/ PETER OPPENEER Magistrate Judge

## UNITED STATES DISTRICT COURT FOR THE WESTERN DISTRICT OF WISCONSIN

| LYD  | ELL W                                                                                      | ASHINGTON,                                                                                                        |             |            |  |  |  |
|------|--------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------|-------------|------------|--|--|--|
|      | Plair                                                                                      | ntiff,                                                                                                            | ORDER       |            |  |  |  |
| V.   |                                                                                            | C                                                                                                                 | ase No. 21- | -cv-37-wmc |  |  |  |
| JAY  | VAN L                                                                                      | ANEN,                                                                                                             |             |            |  |  |  |
|      | Defe                                                                                       | endants.                                                                                                          |             |            |  |  |  |
|      |                                                                                            | PRISONER REQUEST TO PROCEED IN DIST<br>WITHOUT PREPAYING THE FULL FIL                                             |             | URT        |  |  |  |
|      |                                                                                            | ollowing questions to the best of your ability. do not tell the truth, the court may dismiss your laws            | uit.        |            |  |  |  |
| I.   | Personal Information                                                                       |                                                                                                                   |             |            |  |  |  |
| 1)   | Your                                                                                       | Your name:                                                                                                        |             |            |  |  |  |
|      | (a) State the place of your incarceration and provide your prisoner identification number: |                                                                                                                   |             |            |  |  |  |
|      |                                                                                            | (place)                                                                                                           | (number)    |            |  |  |  |
|      | (b)                                                                                        | Are you employed at the institution?                                                                              | □Yes        | □ No       |  |  |  |
|      | (c)                                                                                        | Do you receive any payment from the institution?                                                                  | □Yes        | □ No       |  |  |  |
| mont | h perio                                                                                    | ntout of your prison trust account statement show d immediately preceding the filing of this request our account. | _           |            |  |  |  |
| 2)   | Do yo                                                                                      | ou have any dependents that you are responsible for s                                                             | upporting?  |            |  |  |  |
|      | □ Yes                                                                                      | s □ No                                                                                                            |             |            |  |  |  |
|      | If "ye                                                                                     | s," list them below.                                                                                              |             |            |  |  |  |

|    | e or initials (for<br>or children only)                                                                                                                        | Relationship to You                | <u>Age</u>     | Amount of Support <a href="Provided per Month">Provided per Month</a> |  |  |  |
|----|----------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|----------------|-----------------------------------------------------------------------|--|--|--|
|    |                                                                                                                                                                |                                    |                | \$                                                                    |  |  |  |
|    |                                                                                                                                                                |                                    |                |                                                                       |  |  |  |
|    |                                                                                                                                                                |                                    |                | \$                                                                    |  |  |  |
| I. | Property or Asser                                                                                                                                              | ts: - If you are married, your     | answers must i | include your spouse's                                                 |  |  |  |
| 1) | Do you own a car                                                                                                                                               | ?                                  |                |                                                                       |  |  |  |
|    | □ Yes □ N                                                                                                                                                      | No                                 | If "yes," l    | list the car(s) below:                                                |  |  |  |
|    | Make and Model                                                                                                                                                 |                                    | <u>Year</u>    | Approximate Current Value                                             |  |  |  |
|    |                                                                                                                                                                |                                    |                | \$                                                                    |  |  |  |
|    |                                                                                                                                                                |                                    |                | \$                                                                    |  |  |  |
| 2) | Do you own your                                                                                                                                                | home(s)? □ Yes                     | □ No           |                                                                       |  |  |  |
|    | If "Yes," state the approximate value(s). \$                                                                                                                   |                                    |                |                                                                       |  |  |  |
|    | What is the amount of equity (assessed value of residence minus outstanding mortgage balance) in the home(s)? \$                                               |                                    |                |                                                                       |  |  |  |
| 3) | Do you have any cash or checking, savings, or other similar accounts? $\Box$ Yes $\Box$ No                                                                     |                                    |                |                                                                       |  |  |  |
|    | If "Yes," state the                                                                                                                                            | total of such sums. \$_            |                |                                                                       |  |  |  |
| 1) | Do you own any other property of value, such as real estate, stocks, bonds, trusts, or individual retirement accounts (e.g., IRA, 401 k), artwork, or jewelry? |                                    |                |                                                                       |  |  |  |
|    | □ Yes □ N                                                                                                                                                      | No                                 |                |                                                                       |  |  |  |
|    | If "Yes," describe                                                                                                                                             | the property and the approximation | mate value(s). |                                                                       |  |  |  |
|    |                                                                                                                                                                |                                    |                |                                                                       |  |  |  |
|    |                                                                                                                                                                |                                    |                |                                                                       |  |  |  |

## III. Litigation History

For each federal lawsuit that you recall having filed, list as much of the following information that you remember about each case: The name of the case (that is, the plaintiffs and the defendants), the case number or year of filing, and the federal district in which you filed the case. Use more paper if needed.

| Case Name<br>(Plaintiffs and defendants)                | Case number (or year of filing)                              | Federal district                                                |
|---------------------------------------------------------|--------------------------------------------------------------|-----------------------------------------------------------------|
|                                                         |                                                              |                                                                 |
|                                                         |                                                              |                                                                 |
|                                                         |                                                              |                                                                 |
|                                                         |                                                              |                                                                 |
|                                                         | Describe any other financial c when reviewing this petition. | ircumstance(s) that you would                                   |
|                                                         |                                                              |                                                                 |
|                                                         |                                                              |                                                                 |
|                                                         |                                                              |                                                                 |
| I,, declar am unable to prepay the full fili complaint. |                                                              | ging this complaint. I declare that to the relief sought in the |
| <br>Date                                                | - <u>- Signature - Sign</u>                                  | ed Under Penalty of Perjury                                     |